

PART B - FEE(S) TRANSMITTAL

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7590

07/13/2006

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07/28/2006 WABDEL3 00000024 10695556

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Dawn M. Larsen

(Depositor's name)

Dawn M. Larsen

(Signature)

July 25, 2006

(Date)

01 FC:1501 02 FC:1504 03 FC:0001	1400.00 OP 300.00 OP 30.00 OP	FILING DATE	10/28/2003	FIRST NAMED INVENTOR	William J. Reilly	ATTORNEY DOCKET NO.	26549 USA	CONFIRMATION NO.	9167
APPLICANT	13/695,556								

TITLE OF INVENTION: MODULAR MULTI-FUNCTION FLUID FLOW CONTROL DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/13/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHAMBERS, A MICHAEL	3753	137-549000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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 LLP
 2
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Victaulic Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Easton, PA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies (10)

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- ☐ A check is enclosed.
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- ☒ The Director is hereby authorized to charge any fee deficiencies to charge the required fees; any deficiency, or credit any overpayment, to Deposit Account Number 19-5425 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

John A. Chionchio

Date July 25, 2006

Typed or printed name

John A. Chionchio

Registration No. 40,954

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